

# Authority to Act

Ensure a questionnaire is completed and included with your records

|              |      |        |  |
|--------------|------|--------|--|
| Client Name  |      | Phone: |  |
| Balance Date | 2018 | Email: |  |

To: Dennis O'Grady Limited

## Terms of Engagement

I/ We hereby instruct you to prepare my/our Taxation Returns (and Financial Statements, if applicable) for the year/ period ending noted above. I/ We undertake to supply all information necessary to carry out such services, and will be responsible for the accuracy and completeness of such information including the disclosure of any cash received.

I/ We give authority to Dennis O'Grady Limited to act on my/our behalf for all tax types until further notice. Authority is given to obtain information from Inland Revenue and other financial institutions including banks, solicitors, finance companies and all other government agencies to enable my tax returns to be completed. Information may be requested/ obtained using any/ all communication media.

I/ We give authority for Dennis O'Grady Limited to sign at their discretion any tax return on my/ our behalf any of my/ our associated entities, based on information submitted by myself and provided by the IRD or any relevant party.

## Accident Compensation Corporation

I/ We authorise Dennis O'Grady Limited to act as my/ our agent for ACC levy purposes for all associated entities. This authorisation allows Dennis O'Grady Limited to query and change Information on my/ our ACC levy account(s) through ACC staff, and through MyACC for business. This authority will also allow Dennis O'Grady Limited's main representative discretion to delegate access to my/ our ACC information to other members of the organisation. Other delegated members the organisation will also be able to query and change information on my/ our ACC levy account(s).

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Our full terms of engagement are available on our website (version 201804) or available in hard copy upon request.*

|  |                     |
|--|---------------------|
| Convenient time to call you is:  |                     |
| Would you like us to supply a copy to your bank?   | Yes No (Circle One) |
| If your accounts are to be supplied to your bank, please advise the name of your current bank manager: |                     |

Don't forget to complete a questionnaire

|                   |                   |         |       |
|-------------------|-------------------|---------|-------|
| Office Use Only   |                   |         |       |
| OB / NR / ER / SR | DO / SO / DM / EG | LC / JI | U / P |